

ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION | INITIALS | ID NO. | DATE |
|---------------------------|----------|--------|----------|
| FEE DETERMINATION | | | |
| O.I.P.E. CLASSIFIER | | 5 | 7-05-01 |
| FORMALITY REVIEW | 11.5 | 943 | 7-3-1 |
| RESPONSE FORMALITY REVIEW | SLC | 89 | 12-19-01 |

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral).... Canceled A Appeal
 + Restricted O Objected

BEST AVAILABLE COPY

| Claim | Date |
|----------------|---------|
| Final Original | |
| 1 | 12/1/02 |
| 2 | ✓ |
| 3 | ✓ |
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| Claim | Date |
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| Final Original | |
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| Claim | Date |
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If more than 150 claims or 10 actions
staple additional sheet here

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10/6/03
10/6/03